

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) 4544 - 051674
<b>FY 2008</b> <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		
Application Number 10/538,423	Filed 1/30/2006	
For "A Salt Tolerant L-Myo-Inositol 1-Phosphate Synthase and the Process of Obtaining the Same"		
Art Unit 1652	Examiner Malgorzata A. Walicka	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ _____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$460	\$230	\$ _____
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1050	\$525	\$ <u>1050.00</u>
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$ _____

☐ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

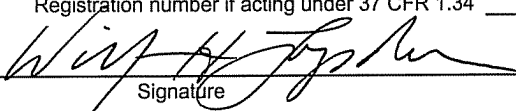
☒ Payment by credit card.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 23-0650.

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor.  
☐ assignee of record of the entire interest. See 37 CFR 3.71.  
                 Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).  
☒ attorney or agent of record. Registration Number 22132  
☐ attorney or agent under 37 CFR 1.34.  
                 Registration number if acting under 37 CFR 1.34 \_\_\_\_\_

  
 \_\_\_\_\_  
 Signature  
 William H. Logsdon  
 \_\_\_\_\_  
 Typed or printed name

August 25, 2008  
 Date  
412-471-8815  
 Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.